U.S. Depertment of Labor Office of Labor-Management Standards Washington, DC 20210

## FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U - 5/6 1/18	2. Fiscal Year Covered From:
2327	1/1/04 Through: [2/0]/04
3. Name and address of person filling.	4. Name, file number, and address of labor organization.
Name TERRY J MEYER	Name SEIW LOCAL 116
	Labor Organization File Number 516 453
P.O. Box, Bldg., Room No., if any	P.O. Box, Building and Room Number, If any
street 1607 Westhaven DR	Street 1667 Westhaven DR
City Belleville	City Belleville
State IL ZIP Code + 4 62270 3	247 State IL ZIP Code +4 62220-324
5. Position in labor organization.	
Recording 5	ecretary
A. Held an interest in, engaged in transactions (including loans) with nonetary value from an employer whose employees your organ	
5. Name and address of Employer (including trade name, if any).	7.6. Habito di Harrion, Harrisono, I. di Habito.
Name	
Trade Name, if any:	
P.O. Box, Bldg., Room No., if any	
	7.b. Amount.
Street	
City	
State ZIP Code + 4	
	Signature
15. Signature and varification. The undersigned declares, under penal submitted in this report (including the information contained in any accomundersigned's knowledge and belief, true, correct, and complete. (See the	alty of Perjury and other applicable penalties of the law, that all of the information in the penalties of the section on penalties in the instructions.)
Signed Terry Myn	On 6/12/05 618-234-1074  Date Telephone Number